

SERIAL NUMBER :

09/700296

**TO: PCT OFFICE OF FINANCE
CRYSTAL PLAZA 2 - 5TH FLOOR**

FROM : PCT INTERNATIONAL DIVISION - DO/EO

PLEASE PROCESS THE FOLLOWING CORRECTIONS :

OTTER:

OTHER: CHARGE VOUCHER IS ATTACHED TO CHARGE / REFUND
ADDITIONAL FEES

THE ORIGINAL METHOD OF PAYMENT WAS :

BY A CHECK
 BY A CHARGE TO DEPOSIT ACCOUNT NO. _____

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09/700296

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		\$ 0
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	21 minus 20=	1
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE

OTHER THAN
OR SMALL ENTITY

RATE	FEES
BASIC FEE	500
XS 9=	9
X40=	80
+135=	
TOTAL	589

RATE	FEES
BASIC FEE	1000
XS18=	18
X80=	160
+270=	
OR TOTAL	178

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL FEE	
					RATE	ADDITIONAL FEE
Total		MINUS	"	"	XS 9=	
Independent		MINUS	"	"	X40=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

SMALL ENTITY OR OTHER THAN
OR SMALL ENTITY

RATE	ADDI- TIONAL FEE
XS 9=	
X40=	
+135=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
XS18=	
X80=	
+270=	
TOTAL ADDT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL FEE	
					RATE	ADDITIONAL FEE
Total		MINUS	"	"	XS 9=	
Independent		MINUS	"	"	X40=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

RATE	ADDI- TIONAL FEE
XS 9=	
X40=	
+135=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
XS18=	
X80=	
+270=	
TOTAL ADDT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL FEE	
					RATE	ADDITIONAL FEE
Total		MINUS	"	"	XS 9=	
Independent		MINUS	"	"	X40=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

RATE	ADDI- TIONAL FEE
XS 9=	
X40=	
+135=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
XS18=	
X80=	
+270=	
TOTAL ADDT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.